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## Application Data Sheet

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### Application Information

Application Type::	Regular
Subject Matter::	Utility
Title Line One::	VASCULAR INDUCING IMPLANTS
Attorney Docket Number::	B0410/7269D2
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	17
Small Entity::	No

### Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country:	US
Status::	Full Capacity
Given Name::	Richard
Middle Name::	A.
Family Name::	Gambale
City of Residence::	Tyngsboro
State or Province of Residence::	MA
Street of mailing address::	382 Dunstable Road
City of Mailing Address::	Tyngsboro
State or Province of Mailing Address::	MA
Postal or Zip Code of mailing address::	01879

Applicant Authority Type::	Inventor
Primary Citizenship Country:	US
Status::	Full Capacity
Given Name::	Stephen
Middle Name::	J.
Family Name::	Forcucci
City of Residence::	Medford
State or Province of Residence::	MA
Street of mailing address::	17 Pitcher Avenue
City of Mailing Address::	Medford
State or Province of Mailing Address::	MA
Postal or Zip Code of mailing address::	02155

Applicant Authority Type:: Inventor  
Primary Citizenship Country: US  
Status:: Full Capacity  
Given Name:: Michael  
Middle Name:: F.  
Family Name:: Weiser  
City of Residence:: Groton  
State or Province of Residence:: MA  
Street of mailing address:: 516 Martin's Pond Road  
City of Mailing Address:: Groton  
State or Province of Mailing Address:: MA  
Postal or Zip Code of mailing address:: 01450

Applicant Authority Type:: Inventor  
Primary Citizenship Country: US  
Status:: Full Capacity  
Given Name:: Richard  
Middle Name:: T.  
Family Name:: Choh  
City of Residence:: Waltham  
State or Province of Residence:: MA  
Street of mailing address:: P. O. Box 1332  
City of Mailing Address:: Waltham  
State or Province of Mailing Address:: MA  
Postal or Zip Code of mailing address:: 02154

Applicant Authority Type:: Inventor  
Primary Citizenship Country: US  
Status:: Full Capacity  
Given Name:: Sean  
Middle Name::  
Family Name:: Forde  
City of Residence:: Watertown  
State or Province of Residence:: MA  
Street of mailing address:: 16 Frank Street  
City of Mailing Address:: Watertown  
State or Province of Mailing Address:: MA  
Postal or Zip Code of mailing address:: 02172

### **Correspondence Information**

Correspondence Customer No.: 022832

### **Representative Information**

Representative Customer No.: 022832

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Divisional of	09/774,319	01/31/2001
09/774,319	Divisional of	09/164,173	09/30/1998

### Assignee Information

Assignee Name:: C. R. Bard, Inc.  
Street of Mailing Address:: 730 Central Avenue  
City of Mailing Address:: Murray Hill  
State or Province of mailing address:: NJ  
Postal or Zip Code of mailing address:: 07974